

Formality Review Claims Count Sheet

Case No. _____

Date: _____ / _____ / _____

As Filed			As Filed			As Filed			As Filed		
No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.
1	1		51	1	1	101			151		
2		1	52	1	1	102			152		
3	1		53	1	1	103			153		
4	3		54	1		104			154		
5	1		55		1	105			155		
6	1		56		1	106			156		
7		1	57		1	107			157		
8		1	58		1	108			158		
9		1	59	1		109			159		
10		1	60		1	110			160		
11		1	61		1	111			161		
12		1	62		1	112			162		
13		1	63		1	113			163		
14		1	64	Total claims		114			164		
15		1	65			115			165		
16		1	66			116			166		
17		1	67			117			167		
18		1	68			118			168		
19		1	69			119			169		
20		1	70			120			170		
21		1	71			121			171		
22		1	72			122			172		
23		1	73			123			173		
24	1	1	74			124			174		
25	1	1	75			125			175		
26	1		76			126			176		
27	1	1	77			127			177		
28	1	1	78			128			178		
29	1	1	79			129			179		
30	1	1	80			130			180		
31	1	1	81			131			181		
32	1	1	82			132			182		
33	1	1	83			133			183		
34	1	1	84			134			184		
35	1	1	85			135			185		
36	3	1	86			136			186		
37	3	1	87			137			187		
38	1		88			138			188		
39	1	1	89			139			189		
40	2	1	90			140			190		
41	2		91			141			191		
42	1		92			142			192		
43	1		93			143			193		
44	1	1	94			144			194		
45	1		95			145			195		
46	1	1	96			146			196		
47	1	1	97			147			197		
48	1	1	98			148			198		
49	1	1	99			149			199		
50	1		100			150			200		

T. Ind. _____

T. Ind. _____

T. Dep. _____

T. Dep. _____

Total _____

Total _____

T. Ind. _____

T. Dep. _____

Total _____

T. Ind. _____

T. Dep. _____

Total _____

claim #51 is number twice